

Important Things to Remember!

- VRE can live outside of the body on items such as bathroom fixtures, wheelchairs and bedding depending on the environment.
- Gowns and gloves should be used by health-care providers and visitors when having direct contact with a VRE-infected resident and when handling laundry.
- Environmental cleaning is of vital importance. Cleaning with one part bleach to nine parts water is recommended.
- Washing hands with soap and water or using an alcohol-based hand sanitizer is a must.

**HAND
WASHING
IS THE
FIRST
LINE OF
DEFENSE!**



For more information visit the following websites:

Centers for Disease Control and Prevention (CDC)

www.cdc.gov/ncidod/dhqp/pdf/ar/MDROGuideline2006.pdf

www.cdc.gov/mmwr/preview/mmwrhtml/00039349.htm

CDC Long Term Care Infection Control

www.cdc.gov/ncidod/dhqppl_longterm_care.html

APIC/SHEA Guideline-Infection Control in Long Term Care

www.apic.org/Content/NavigationMenu/PracticeGuidance/APIC-SHEA_Guideline.pdf

Healthcare Infection Control Practices Advisory Committee (HICPAC)

www.cdc.gov/hicpac

Association for Professionals in Infection Control and Epidemiology (APIC)



NORTH DAKOTA
DEPARTMENT of HEALTH

Prevention tips and care of the resident with

VRE
(Vancomycin-resistant enterococci)



Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

VRE

Vancomycin is an antibiotic that is used to treat some drug-resistant infections. Bacteria such as enterococci that have become resistant to this drug are called vancomycin-resistant enterococci (VRE).

VRE can live in the intestines and female genital tract without causing infection (often called colonization). However, it can cause infections of the urinary tract, bloodstream, wounds, catheter sites and surgical sites.

People are at increased risk of becoming infected with VRE if they previously have been treated with the antibiotic vancomycin. They also are at risk if they have been on other antibiotics for long periods of time or if they are colonized with VRE.

Prescribed antibiotics should always be taken as directed and until completed.



Treatment

People colonized with VRE do not need treatment. Most VRE infections should be treated with antibiotics other than vancomycin.

For people with VRE infections in their bladder and who have urinary catheters, removal of an unneeded catheter also can help get rid of the infection. If the catheter is needed, follow physician's recommendations.

Environmental Cleaning

VRE often is passed from person to person by the contaminated hands of residents, caregivers, as well as visitors. VRE also can be spread directly to people after they touch surfaces that are contaminated with VRE, such as bedding, towels, wheelchairs, walkers, etc.

Environmental cleaning is of vital importance to keep health-care providers and visitors healthy. This includes the resident's room and bathroom as well as equipment, such as wheelchairs, walkers, blood pressure cuffs, etc.

Laundry from infected residents should be handled using contact isolation protocols.

Precautions - Stop the Spread!

Residents with VRE should have dedicated equipment, including blood pressure cuffs, stethoscopes, etc.

Visitors and health-care providers should wear disposable gloves and a gown when having direct contact with a VRE-infected resident or his or her laundry.

Hand washing should occur:

- **Immediately after using the bathroom.**
- **Before and after all resident contact.**
- **Before and after contact with items in the resident's room.**
- **Immediately after removing gloves.**

Ambulatory residents who are not alert and oriented should be in a private room. Residents can attend activities and meals if 1) their infected wound is dry and covered, 2) they are afebrile and alert, and 3) any incontinence can be contained.

VRE-infected residents must only use the bathroom dedicated to them in their room. Residents must wash their hands with soap and water prior to leaving their room to attend activities and before all meals.